

# MONTEREY COUNTY RESOURCE MANAGEMENT AGENCY

Carl P. Holm, AICP, Director



LAND USE & COMMUNITY DEVELOPMENT | PUBLIC WORKS & FACILITIES | PARKS

1441 Schilling Place, South 2<sup>nd</sup> Floor  
Salinas, California 93901-4527

(831)755-4800

www.co.monterey.ca.us/rma

## EXTENSION REQUEST FOR BUILDING OR GRADING APPLICATIONS AND PERMITS

Submittal can be made on of the following ways:

- In person or by mail at the above address
- Fax (831) 757-9516
- E-mail to [permitextensions@co.monterey.ca.us](mailto:permitextensions@co.monterey.ca.us)

Assessor's Parcel No.: \_\_\_\_\_ Permit No.: \_\_\_\_\_

Status of Permit:  Applied  Issued  Request for Final Building Inspection

Project Address: \_\_\_\_\_

Reason for Extension: \_\_\_\_\_

Property Owner /  Applicant Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

- Extension must be paid within 14 days of notification of approval. Payments not made within this timeframe will have to re-submit a new Extension Request Form and will be subject to an additional fee. -

### FOR OFFICE USE ONLY

Staff accepting request: \_\_\_\_\_ Current Application/Permit Exp. Date: \_\_\_\_\_

Are there any other expired applications or permits on the property? -----  Yes -----  No

Has the application or permit had a previous extension? -----  Yes -----  No

Were the plans designed under a previous building code cycle?-----  Yes -----  No

Are there any open code violations? -----  Yes -----  No

Does extension meet Permit Technicians Approval Requirements? -----  Yes -----  No

Code Compliance Case No.: \_\_\_\_\_

Extension:  Allowable  Denied If allowable, extension valid until: \_\_\_\_\_

Reviewed by: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Approved  Denied

Extension Fee: \_\_\_\_\_ Inspection Fee: \_\_\_\_\_ Total Fee: \_\_\_\_\_

Signature of Approving Staff \_\_\_\_\_ Print Name \_\_\_\_\_ Date \_\_\_\_\_

Notes: \_\_\_\_\_

An approved Final Building Inspection must be completed within \_\_\_\_\_ from the receipt of payment or a new Extension and fee will be required.

Date Applicant notified of approval/denial: \_\_\_\_\_ Staff: \_\_\_\_\_